**Health Protection for schools, nurseries, and other childcare facilities** 17/08/2022

**Exclusion Table**

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| **Infection** | **Exclusion Period** | **Comments** |
| Athlete’s foot | None | Children should not be barefoot in their setting and should not share towels, socks, or shoes with others. Athlete’s foot is not a serious condition. Treatment is recommended |
| Chickenpox | Five days from onset of rash | Blisters on the rash must be dry and crusted over |
| Cold Sores (herpes simplex) | None | Avoid kissing and contact with the sores. Cold sores are generally mild and heal without treatment |
| Conjunctivitis | None | If an outbreak/cluster occurs, consult your local HPT |
| Respiratory infections including coronavirus COVID-19 | Children should not attend if they have a high temperature and are unwell. Children and young people who have a positive test result for COVID-19 should not attend the setting for 3 days after the day of the test. | Children with mild symptoms such as a runny nose, and headache who are otherwise well can continue to attend their setting. |
| Diarrhoea or vomiting | Whilst symptomatic and 48 hours after the last symptoms | Ensure the case is excluded for 48 hours. |
| Diphtheria \* | Exclusion is essential. Always consult your UKHSA HPT | Preventable by vaccination. Family contacts must be excluded until cleared to return by your local HPT |
| Flu (influenza) | Until recovered | Report outbreaks to your local HPT |
| Glandular Fever | None |  |
| Hand foot and mouth | None | Contact your local HPT if a large number of children are affected. Exclusion may be considered in some circumstances |
| Head Lice | None | Treatment recommended only when live lice seen |
| Hepatitis A\* | Exclude until seven days after onset of jaundice (or 7 days after symptom onset if no jaundice) | In an outbreak of hepatitis A, your local HPT will advise on control measures |
| Hepatitis B\*, C\*, HIV | None | Hepatitis B and C and HIV are blood borne viruses that are not infectious through casual contact. Contact your local HPT for more advice |
| Impetigo | Until lesions are crusted/healed or 48 hrs after starting antibiotic treatment | Antibiotic treatment speeds healing and reduces the infectious period |
| Measles \* | Four days from onset of rash and recovered | Preventable by vaccination (2 doses of MMR). Promote MMR for all pupils and staff. Pregnant staff contacts should seek prompt advice from their GP or midwife |
| Meningococci al meningitis\*/ septicaemia\* | Until recovered | Meningitis ACWY and B are preventable by vaccination (see national schedule @www.nhs.uk). Your local HPT will advise on any action needed |
| Meningitis\* due to other bacteria | Until recovered | Hib and pneumococcal meningitis are preventable by vaccination (see national schedule @www.nhs.uk). Your local HPT will advise on any action needed |
| Meningitis viral\* | None | Milder illness than bacterial meningitis. Siblings and other close contacts of a case need not be excluded. |
| MRSA | None | Good hygiene, in particular handwashing and environmental cleaning, are important to minimise spread. Contact your local HPT for information |
| Mumps\* | Five days after onset of swelling | Preventable by vaccination with 2 doses of MMR (see national schedule @www.nhs.uk). Promote MMR for all pupils and staff |
| **Infection** | **Exclusion Period** | **Comments** |
| Ringworm | Not usually required | Treatment is needed |
| Rubella (German measles) | Four days from onset of rash | Preventable by vaccination with 2 doses of MMR (see national schedule @www.nhs.uk). Promote MMR for all pupils and staff. Pregnant staff contacts should seek prompt advice from their GP or midwife |
| Scarlet Fever | Exclude until 24hrs of appropriate antibiotic treatment completed | A person is infectious for 2-3 weeks if antibiotics are not administered. In the event of two or more suspected cases please contact health protection |
| Scabies | Can return after first treatment | Household and close contacts require treatment at the same time |
| Slapped cheek/Fifth disease/Parvo virus B19 | None (once rash has developed) | Pregnant contacts of case should consult with their GP or midwife |
| Temperature | 24 hours after temperature returns to normal and negative COVID test result. | COVID19 test to be taken before returning or 14 days exclusion. |
| Threadworms | None | Treatment recommended for child & household |
| Tonsillitis | None | There are many causes, but most cases are due to viruses and do not need an antibiotic treatment |
| Tuberculosis (TB) | Until at least 2 weeks after the start of effective antibiotic treatment (if pulmonary or latent TB Exclusion not required for non-pulmonary or latent TB infection.  Always consult your local HPT BEFORE disseminating information to staff/ parents/ carers | Only pulmonary (lung) TB is infectious to others. Needs close, prolonged contact to spread |
| Warts and Verrucae | None | Verrucae should be covered in swimming pools, gyms and changing rooms |
| Whooping cough (pertussis)\* | Two days from starting antibiotic treatment, or 21 days from onset of symptoms if no antibiotics | Preventable by vaccination. After treatment, non-infectious coughing may continue for many weeks. Your local HPT will organise any contact tracing |

**\*denotes a notifiable disease. It is a statutory requirement that doctors report a notifiable disease to the proper officer of the local authority (usually a consultant in communicable disease control).**